

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to:</p> <p><i>T-Mobile</i>  <i>Legal Emergency Response</i>  <i>4 Sylvan Way</i>  <i>Parsippany, NJ 07054</i></p>		<p>A. Signature <i>T-Mobile USA</i></p> <p><i>4 Sylvan Way</i></p> <p><i>Parsippany, NJ 07054</i></p> <p>B. Received by (Printed Name) <i>Attn:</i></p> <p>C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If YES, enter delivery address below:</p>	
<p>2. <i>7018 1830 0000 9605 5838</i></p>		<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail</p> <p><input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>	
<p>PS Form 3811, February 2004</p>		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	

Domestic Return Receipt

102595-02-M-1540

UNITED STATES POSTAL SERVICE

NEARBY TO GO

17 OCT 2024 PM 11:1

First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

- Sender: Please print your name, address, and ZIP+4 in this box •

US District Court  
Clerk, Rm 4015  
50 Walnut St.  
Newark, NJ 07102

2445721